United States of America

Department of Transportation—Jederal Aviation Administration

Supplemental Type Certificate

Number SA7030SW-D

This certificate, issued to Falcon Jet Corporation

P.O. Box 967

Little Rock, Arkansas 72203

cortifies that the change in the type design for the following product with the limitations and conditions

therefor as specified hereon meets the airworthiness requirements of Part 25 of the Federal Aviation

Regulations.

Original Product - Type Certificator Number:

Make: Avions Marcel Dassault-Breguet Aviation

Model:

Falcon 10

Description of Type Design Change:

Installation of the Sperry SPZ-500/EDZ-603 Integrated Flight Control System in accordance with Drawing List Report Number F10-01030, Revision E dated 5-11-87, or later FAA approved revision.

Limitations and Conditions:

FAA Approved Airplane Flight Manual Supplement, Report Number 35767-1, Rev. A dated May 28, 1987, is required.

Compatibility of this modification with other previously approved modifications must be determined by the installer.

This STC utilizes STC SA1002EA, reissued 1-7-80, as a certification basis of compliance.

This certificate and the supporting data which is the basis for approval shall remain in effect until sur-

rendered, suspended, revoked, or a termination date is otherwise established by the Administrator of the

Federal Aviation Administration.

Date of application: November 22, 1985

Date of issuence:

August 22, 1986

Dale amended: 5-28-87

Rev. 1

The direction of the Administrator

Joseph A. Sevart (Signature)

DASSSW COORDINATOR

(Title)

Any alteration of this certificate is punishable by a fine of not exceeding \$1,000, or imprisonment not exceeding 3 years, or both.

INSTRUCTIONS: The transfer endorsement below may be used to notify the appropriate FAA Regional Office of the transfer of this Supplemental Type Certificate. The FAA will reissue the certificate in the name of the transferee and forward it to him. TRANSFER ENDORSEMENT Transfer the ownership of Supplemental Type Certificate Number to (Name of transferee)_____ (Address of transferee) (Number and street) (City, State, and ZIP code) from (Name of grantor) (Print or type) (Address of grantor) (City, State, and ZIP code) Extent of Authority (if licensing agreement): Date of Transfer:

Signature of grantor (In ink):